10197386

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

8305-23715 (NP147-1)

CLAIMS AS FILED - PART I											<u>·</u>	
			(Column 1)		(Column 2)		<u>.</u> .	SMALL ENTITY TYPE		OF	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			7.					RATE	FEE	ר <u>ַ</u>	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		]	BASIC FE	€ 385.00	OR		
TOTAL CHARGEABLE CLAIMS			7 minus 20=		•		]	XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			<del></del>	ninus 3 =				X43=		OR	X86=	
M	ULTIPLE DEPE	NDENT CLAIM F	PRESENT				]	+145=		OR		
•1	f the differenc	e in column 1 is	less than z	ero, enter	"0" in c	column 2	1	TOTAL	-	OR	TOTAL	770
	CLAIMS AS AMENDED - PART II  11-16-06 (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 7	Minus	- 2	0	= (		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	NTATION OF M	Minus ULTIPLE DE	PENDENT	CL AIM:	= ,		X43=.		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
					· ·			TOTAL DDIT, FEE		OR	TOTAL	
_	,	(Column 1)		(Colum		(Column 3)			•	•	ODII. FEE	
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
	Independent	NTATION OF ME	Minus	***		=		X43=		OR	X86=	
	FINST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	LAIM		<b>'</b>   †	+145=		OR	+290=	
								TOTAL DOIT, FEE		OB L	TOTAL	
		(Column 1)		(Column	r2) (	Column 3)	~1	JUIL PEE E	•	-,· , <b>,</b>	DOTT. FEEL	· ·
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ET ER SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	Ī	RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	[	-		X\$ 9=		OR	X\$18=	
			Minus	***		=		X43=			X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del>^</del>	—— <b> </b> '	DR -	A80≅	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** TOTAL ADDIT FEE												
	nic infilicationi	nber Previously Paid per Previously Paid		COACELL				In the appr		AL.	DOT FEEL	
	70 er ee					<u> </u>				٠.		1